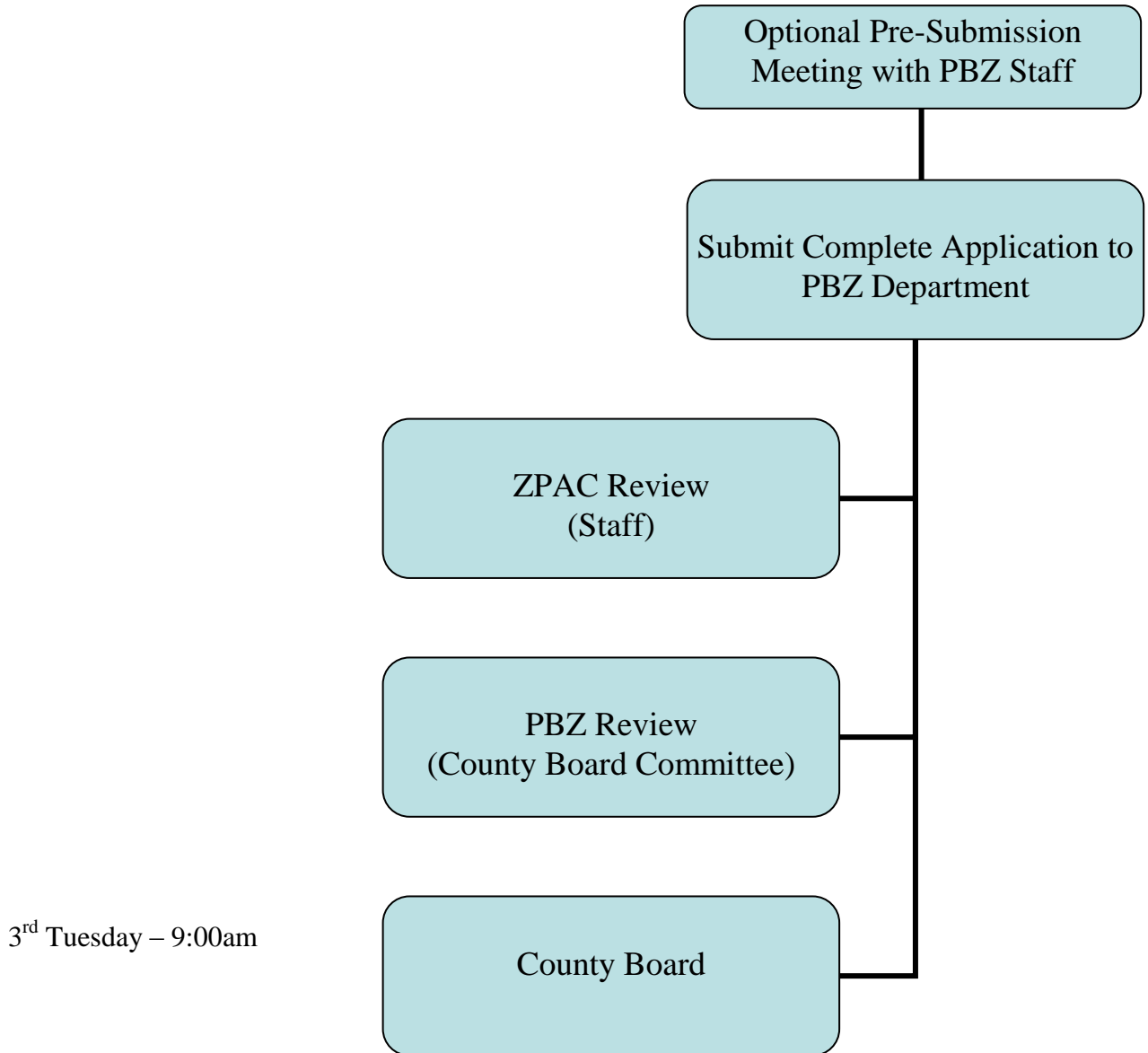


Kendall County Other Plats (Dedication, Vacation, Etc.) Process



Notes:

1. The ZPAC can vote to continue to the next month if more information is needed.



DEPARTMENT OF PLANNING, BUILDING & ZONING

111 West Fox Street • Yorkville, IL • 60560
 (630) 553-4141 Fax (630) 553-4179

APPLICATION

PROJECT NAME _____ FILE #: _____

NAME OF APPLICANT (Including First, Middle Initial, and Last Name)		
CURRENT LANDOWNER/NAME(s)		
SITE INFORMATION ACRES	SITE ADDRESS OR LOCATION	ASSESSOR'S ID NUMBER (PIN)
EXISTING LAND USE	CURRENT ZONING	LAND CLASSIFICATION ON LRMP
REQUESTED ACTION (Check All That Apply):		
<input type="checkbox"/> SPECIAL USE	<input type="checkbox"/> MAP AMENDMENT (Rezone to _____)	<input type="checkbox"/> VARIANCE
<input type="checkbox"/> ADMINISTRATIVE VARIANCE	<input type="checkbox"/> A-1 CONDITIONAL USE for: _____	<input type="checkbox"/> SITE PLAN REVIEW
<input type="checkbox"/> TEXT AMENDMENT	<input type="checkbox"/> RPD (<input type="checkbox"/> Concept; <input type="checkbox"/> Preliminary; <input type="checkbox"/> Final)	<input type="checkbox"/> ADMINISTRATIVE APPEAL
<input type="checkbox"/> PRELIMINARY PLAT	<input type="checkbox"/> FINAL PLAT	<input checked="" type="checkbox"/> OTHER PLAT (Vacation, Dedication, etc.)
<input type="checkbox"/> AMENDMENT TO A SPECIAL USE (<input type="checkbox"/> Major; <input type="checkbox"/> Minor)		
¹ PRIMARY CONTACT	PRIMARY CONTACT MAILING ADDRESS	PRIMARY CONTACT EMAIL
PRIMARY CONTACT PHONE #	PRIMARY CONTACT FAX #	PRIMARY CONTACT OTHER #(Cell, etc.)
² ENGINEER CONTACT	ENGINEER MAILING ADDRESS	ENGINEER EMAIL
ENGINEER PHONE #	ENGINEER FAX #	ENGINEER OTHER # (Cell, etc.)
I UNDERSTAND THAT BY SIGNING THIS FORM, THAT THE PROPERTY IN QUESTION MAY BE VISITED BY COUNTY STAFF & BOARD/ COMMISSION MEMBERS THROUGHOUT THE PETITION PROCESS AND THAT THE PRIMARY CONTACT LISTED ABOVE WILL BE SUBJECT TO ALL CORRESPONDANCE ISSUED BY THE COUNTY.		
I CERTIFY THAT THE INFORMATION AND EXHIBITS SUBMITTED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I AM TO FILE THIS APPLICATION AND ACT ON BEHALF OF THE ABOVE SIGNATURES. THE APPLICANT ATTESTS THAT THEY ARE FREE OF DEBT OR CURRENT ON ALL DEBTS OWED TO KENDALL COUNTY AS OF THE DATE OF THE APPLICATION.		
SIGNATURE OF APPLICANT		DATE

FEE PAID:\$ _____
 CHECK #: _____

¹Primary Contact will receive all correspondence from County

²Engineering Contact will receive all correspondence from the County's Engineering Consultants

Date Stamp Here If
 Checklist Is Complete



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OTHER PLATS (Vacation, Dedication, Etc.)

APPLICATION CHECKLIST

- _____ Completed Application Form
- _____ Application Fee
- _____ Legal description of property involved (Submitted either on CD or emailed to PBZ Department)
- _____ Proof of Ownership (Deed or Title Insurance Policy)
- _____ A beneficiary disclosure statement for property, if held in trust
- _____ **3** initial copies of the Plat for property involved showing the following items (more copies of the Plat will be required for subsequent meetings):
Please note: If submitting copies 11"x17" or smaller, a 24"x36" copy is required for display purposes. One copy must be submitted either on CD or emailed to PBZ Department in PDF format.
- _____ Title
- _____ Scale of Drawing
- _____ "North Arrow" showing north at top of the drawing
- _____ Location Map
- _____ Date of drawing (as well as dates of any and all revisions)
- _____ Names of Developer/Owner
- _____ Names of Designer/Surveyor
- _____ All existing structures on the property and all structures on adjacent properties within 100' of property line
- _____ Utilities on the property and adjacent properties
- _____ Existing easements (location, width and purpose)
- _____ Existing streets and other rights-of-way
- _____ Topography at 1 or 2 foot contours
- _____ Wooded areas (if present)
- _____ Natural drainage to, from and on the property
- _____ Base Flood Elevation (if present on the property)
- _____ Wetlands (if present on the property)
- _____ Present zoning classification and PIN on subject property and all adjacent properties on plat or separate plan



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ZONING APPLICATION FEES

MAP AMENDMENTS

Any amount of acreage \$500.00

SPECIAL USE PERMITS, PLANNED UNIT DEVELOPMENTS/ RESIDENTIAL PLANNED DEVELOPMENTS AND MAJOR AMENDMENTS TO SPECIAL USES

The following fees include a processing fee, a fee for recording the special use in the recorder's office for 10 pages and a cost for the Zoning Board of Appeals at a rate of \$350.00 shall be imposed on ALL Special Uses

All acreage zoned as A-1	\$1,155
All Other Zoning Districts	
0.0-5.00 acres	\$1,155
5.01-10.00 acres	\$1,905
10.01-50.00 acres	\$2,255 + \$50/acre or part thereof over 10 acres
50.01-100.00 acres	\$4,755 + \$35/acre or part thereof over 50 acres
100.01-500.00 acres	\$6,505 + \$20/acre or part thereof over 100 acres
500.01+	\$14,505 + \$15/acre or part thereof over 500 acres

MINOR AMENDMENT TO SPECIAL USE *(includes a processing fee and a fee for recording the minor amendment to the special use in the recorder's office)*

Any amount of acreage \$150.00

VARIANCE *(includes a processing fee and a fee for recording the variance in the recorder's office)*

As part of Special Use \$100
Not part of Special Use \$475 for first Variance Request of petition and \$50 for each additional request to be included in the same petition

ADMINISTRATIVE VARIANCE *(includes a processing fee and a fee for recording the minor amendment to the special use in the recorder's office)*

Any amount of acreage \$150.00

PRELIMINARY PLAT

Residential \$1,000.00 + \$50.00/acre or part of an acre
Other \$1,000.00 + \$100.00/acre or part of an acre

FINAL PLAT

All Final Plats \$50.00/acre or part of an acre (\$500.00 minimum)

OTHER PLAT (Vacation, Dedication, etc.)

All Other Plat Actions \$50.00/acre or part of an acre (\$500.00 minimum)

ADMINISTRATIVE APPEAL	\$1,000.00 ¹
TEXT AMENDMENT	\$500.00
SITE PLAN REVIEW	\$375.00
CONDITIONAL USE	\$100.00
TEMPORARY USES	\$100.00

No waiver and no refund shall be made for any fee paid pursuant to this Ordinance without the approval of the Planning Building and Zoning Committee of the County Board

All fees for actions or activities by Kendall County or the Kendall County Forest Preserve District are hereby waived and all fees for non-profit organizations shall be charged half of the normal fees for zoning petitions; provided they show proof of non-profit status and that the permit be used only by the organizations itself*

¹In the event that ruling by the Zoning Board of Appeals favors the appealing party, the submitted fee for an administrative appeal shall be refunded to the applicant.

The deposit fee for renting the 2012 National Rifle Association Range Source Book can be found in Section 26-1(c) of the Kendall County Code.

ZONING FEES ESTABLISHED BY KENDALL COUNTY ORDINANCE EFFECTIVE 12/17/2019

KENDALL COUNTY
DISCLOSURE OF BENEFICIARIES FORM

1. Applicant _____
Address _____
City _____ State _____ Zip _____

2. Nature of Benefit Sought _____

3. Nature of Applicant: (Please check one)
- Natural Person (a)
 - Corporation (b)
 - Land Trust/Trustee(c)
 - Trust/Trustee (d)
 - Partnership (e)
 - Joint Venture (f)

4. If applicant is an entity other than described in Section 3, briefly state the nature and characteristics of the applicant:

5. If your answer to Section 3 you have checked letter b, c, d, e, or f, identify by name and address each person or entity who is a 5% shareholder in case of a corporation, a beneficiary in the case of a trust or land trust, a joint venture in the case of a joint venture, or who otherwise has proprietary interest, interest in profits and losses or right to control such entity:

NAME	ADDRESS	INTEREST

6. Name, address, and capacity of person making this disclosure on behalf of the applicant:

VERIFICATION

I, _____, being first duly sworn under oath that I am the person making this disclosure on behalf of the applicant, that I am duly authorized to make the disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Subscribed and sworn to before me this _____ day of _____, A.D. _____

(seal)

Notary Public

KENDALL COUNTY TIMETABLE 2025
for OTHER PLATS (VACATION, DEDICATION, ETC.)

Application Deadline	ZPAC	PBZ	CB
By 4:30 p.m.	(9:00 A.M.)	(6:30 P.M.)	(9:00 A.M.)
12/24/24	01/07/25	01/13/25	01/21/25
01/21/25	02/04/25	02/10/25	02/18/25
02/18/25	03/04/25	03/10/25	03/18/25
03/18/25	04/01/25	04/07/25	04/15/25
04/22/25	05/06/25	05/12/25	05/20/25
05/20/25	06/03/25	06/09/25	06/17/25
06/17/25	07/01/25	07/07/25	07/15/25
07/22/25	08/05/25	08/11/25	08/19/25
08/19/25	09/02/25	09/08/25	09/16/25
09/23/25	10/07/25	10/13/25	10/21/25
10/21/25	11/04/25	11/10/25	11/18/25
11/18/25	12/02/25	12/08/25	12/16/25